### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of ORAF

Atty CC-4358-22

3656

Examiner: Thomas C. Diaz

Dkt.

TC/A.U.

C# M#

Date: September 27, 2010

SCHROETTER

Serial No. 10/562,787

Filed: December 29, 2005 RAD

METHOD AND DEVICE FOR THE MECHANICAL OR MAGNETIC

TRANSMISSION OF FORCE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Title:

#### RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

## ☐ Correspondence Address Indication Form Attached.

### Fees are attached as calculated below:

Total effective claims after amendment $20$ minus highest number previously paid for $22$ (at least 20) = 0 x \$52.00 \$0.00 (1202)/\$0.00 (22)	02) \$	0.00
Independent claims after amendment 1 minus highest number previously paid for 3 (at least 3) = 0 x \$220.00 \$0.00 (1201)/ $$0.00 (22)$	01) \$	0.00
If proper multiple dependent claims now added for first time, (ignore improper); add \$390.00 (1203)/\$195.00 (22	03) \$	0.00
Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)  One Month Extension \$130.00 (1251)/\$65.00 (2252)  Two Month Extensions \$490.00 (1252)/\$245.00 (2253)  Three Month Extensions \$1110.00 (1253/\$555.00 (2253)  Four Month Extensions \$1730.00 (1254/\$865.00 (2253)  Five Month Extensions \$2350.00 (1255/\$1175.00 (2253))	2) 3) 54)	490.00
Terminal disclaimer enclosed, add \$140.00 (1814)/ \$70.00 (281	14) \$	0.00
☐ Applicant claims "small entity" status. ☐ Statement filed herewith		
Rule 56 Information Disclosure Statement Filing Fee \$180.00 (1806)	5) \$	0.00
Assignment Recording Fee \$40.00 (802)	1) \$	0.00
Other:	\$	0.00
TOTAL F	EE \$	490.00

# **◯** CREDIT CARD PAYMENT FORM ATTACHED.

The Commissioner is hereby authorized to charge any <u>deficiency</u>, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

C:lmr

CC:lmr

**NIXON & VANDERHYE P.C.** 

By Atty: Chris Comuntzis, Reg. No. 31,097

Signature:

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